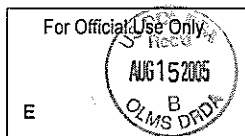


FORM LM-30

LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - <u>6291</u>	2. Fiscal Year Covered From: <u>1</u> / <u>1</u> / <u>2004</u> Through: <u>12</u> / <u>31</u> / <u>2004</u>
3. Name and address of person filing. Name <u>Mark</u> <u>C</u> <u>Teixeira</u> P.O. Box, Bldg., Room No., if any Street <u>1100 Shady Lane</u> City <u>Southlake</u> State <u>Texas</u> ZIP Code + 4 <u>76092</u>	4. Name, file number, and address of labor organization. Name <u>Major League Baseball Players Association</u> Labor Organization File Number <u>064-727</u> P.O. Box, Building and Room Number, if any Street <u>12 East 49th Street</u> City <u>New York</u> State <u>New York</u> ZIP Code + 4 <u>10017-8207</u>
5. Position in labor organization. <u>Representative</u>	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4	7.a. Nature of Interest, Transaction, or Income. 7.b. Amount.

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)		
Signed <u>Mark Teixeira</u>	On <u>8-12-05</u> Date	<u>817-690-6446</u> Telephone Number

Name of Person Filing Mark Teixeira

File Number U-

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name Donruss Playoff L.P.

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 2300 East Randol Mill Road

City Arlington

State Texas

ZIP Code + 4 76011

9. Business deals with:

☒ a. Labor Organization☐ b. Trust☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State

ZIP Code + 4

11.a. Nature of such dealing.

MLBPA Licensee

11.b. Approximate dollar value of such dealing.

\$5,750,370

12.a. Nature of interest held or income received.

Payments for autographing

12.b. Amount.

\$18,096

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State

ZIP Code + 4

14.a. Nature of payment.

13.b. Is the Business an Employer ☐ or Consultant ☐ ?

14.b. Amount of payment.

Name of Person Filing Mark Teixeira

File Number U-

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name Game Time LLC

Trade Name, if any:

P.O. Box, Bldg., Room No., if any P.O. Box 150147

Street

City Arlington

State Texas

ZIP Code + 4 76015

9. Business deals with:

☒ a. Labor Organization☐ b. Trust☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State

ZIP Code + 4

11.a. Nature of such dealing.

MLBPA Licensee

11.b. Approximate dollar value of such dealing.

\$33,326

12.a. Nature of interest held or income received.

Payment for public appearance and autographing

12.b. Amount.

\$11,775

Name of Person Filing Mark Teixeira

File Number U-

Part B Continuation Page

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8. Name and address of Business (including trade name, if any).

Name Dr. Pepper

Trade Name, if any:

P.O. Box, Bldg., Room No., if any P.O. Box 869330

Street

City Plano

State Texas

ZIP Code + 4 75086-9330

9. Business deals with:

☐ a. Labor Organization☐ b. Trust☒ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name Texas Rangers

Trade Name, if any:

P.O. Box, Bldg., Room No., if any 1000 Ballpark Way

Street

City Arlington

State Texas

ZIP Code + 4 76011

11.a. Nature of such dealing.

Please see Addendum.

11.b. Approximate dollar value of such dealing.

12.a. Nature of interest held or income received.

Payment for public appearance.

12.b. Amount.

\$5,000

Name of Person Filing Mark Teixeira

File Number U-

Part B Continuation Page

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8. Name and address of Business (including trade name, if any).

Name Fler/Skybox International

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 1120 Route 73, Suite 300

City Mt. Laurel

State New Jersey

ZIP Code + 4 08054

9. Business deals with:

☒ a. Labor Organization

☐ b. Trust

☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State

ZIP Code + 4

11.a. Nature of such dealing.

MLBPA Licensee

11.b. Approximate dollar value of such dealing.

\$15,000

12.a. Nature of interest held or income received.

Payment for autographing baseball cards

12.b. Amount.

\$10,900

Name of Person Filing Mark Teixeira

File Number U-

Part B Continuation Page

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8. Name and address of Business (including trade name, if any).

Name Just Memorabilia

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 1500 Wilson Way, Suite 250

City Smyrna

State Georgia

ZIP Code + 4 30082

9. Business deals with:

☐ a. Labor Organization

☐ b. Trust

☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State

ZIP Code + 4

11.a. Nature of such dealing.

Please see Addendum.

11.b. Approximate dollar value of such dealing.

12.a. Nature of interest held or income received.

Payment for autographing baseball cards.

12.b. Amount.

\$8,000

Name of Person Filing Mark Teixeira	File Number U-
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Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

<p>8. Name and address of Business (including trade name, if any).</p> <p>Name GMR Marketing</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street 5000 South Towne Drive</p> <p>City New Berlin</p> <p>State Wisconsin ZIP Code + 4 53151</p>	<p>9. Business deals with:</p> <p><input type="checkbox"/> a. Labor Organization</p> <p><input type="checkbox"/> b. Trust</p> <p><input type="checkbox"/> c. Employer</p>
<p>10. If 9.b. or 9.c. is checked give trust or employer's name.</p> <p>Name</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p>11.a. Nature of such dealing.</p> <p>Please see attached Addendum.</p> <p>11.b. Approximate dollar value of such dealing.</p> <p>12.a. Nature of interest held or income received.</p> <p>Payment for public appearance and autographing items.</p> <p>12.b. Amount. \$5,000</p>

Name of Person Filing Mark Teixeira	File Number U-
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Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

<p>8. Name and address of Business (including trade name, if any).</p> <p>Name <u>The Upper Deck Company</u></p> <p>Trade Name, if any: <u></u></p> <p>P.O. Box, Bldg., Room No., if any <u></u></p> <p>Street <u>5909 Sea Otter Place</u></p> <p>City <u>Carlsbad</u></p> <p>State <u>California</u> ZIP Code + 4 <u>92008-6621</u></p>	<p>9. Business deals with:</p> <p><input checked="" type="checkbox"/> a. Labor Organization</p> <p><input type="checkbox"/> b. Trust</p> <p><input type="checkbox"/> c. Employer</p>
<p>10. If 9.b. or 9.c. is checked give trust or employer's name.</p> <p>Name <u></u></p> <p>Trade Name, if any: <u></u></p> <p>P.O. Box, Bldg., Room No., if any <u></u></p> <p>Street <u></u></p> <p>City <u></u></p> <p>State <u></u> ZIP Code + 4 <u></u></p>	<p>11.a. Nature of such dealing.</p> <p><u>MLBPA Licensee</u></p> <hr/> <p>11.b. Approximate dollar value of such dealing. <u>\$4,061,574</u></p> <hr/> <p>12.a. Nature of interest held or income received.</p> <p><u>Payment for autographing baseball cards.</u></p> <hr/> <p>12.b. Amount. <u>\$35,302</u></p>

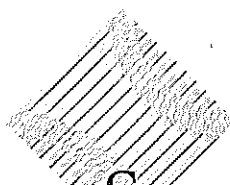
ADDENDUM TO FORM LM-30
Labor Organization Officer and Employee Report
For Mark Teixeira

In 2004, I received endorsement income from three businesses that, insofar as I know, do not do businesses with the MLBPA, but that may do businesses with the Major League Baseball Clubs and/or with Major League Baseball. I do not know whether any of these businesses have such extensive commercial dealings with the Clubs and/or with Major League Baseball that those commercial dealings represent a "substantial part" of their overall business operations. Accordingly, in a good faith effort to fully meet (and perhaps go beyond) my reporting obligation, I am stating below the amount of endorsement income I received from each of these businesses in 2004:

- | | | |
|----|-------------------------|--------------------------------------|
| 1. | Company: | Dr. Pepper |
| | Nature of Deal: | Payment for public appearance |
| | Amount Received: | \$5,000.00 |

- | | | |
|----|-------------------------|---|
| 2. | Company: | Just Memorabilia |
| | Nature of Deal: | Payment for autographing baseball cards. |
| | Amount Received: | \$8,000 |

- | | | |
|----|-------------------------|---|
| 3. | Company: | GMR/SFX Marketing |
| | Nature of Deal: | Payment for public appearance and autographing labels. |
| | Amount Received: | \$5,000.00 |



Scott Boras
CORPORATION

Serving the Athletes of Baseball

August 11, 2005

Via UPS Next Day Air

Tracking #: 1Z F83 4F7 01 4697 9283

Mark Teixeira
Texas Rangers
Visiting the New York Yankees
East 161st Street and River Avenue
Bronx, NY 10451

Re: U.S. Department of Labor
Form LM-30: Labor Organization Officer and Employee Report

Dear Mark:

Enclosed please find a Labor Organization Office and Employee Report form, which must be filed with the Department of Labor by **MONDAY, AUGUST 15, 2005.**

Please kindly sign the form where indicated and send it directly to the Department of Labor in the enclosed self-addressed UPS envelope.

Should you have any questions pertaining to this matter, please do not hesitate to call our office.

Sincerely,

Ana Osorio
Administrative Assistant

Enc: LM-30